

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Swift Transportation  
c/o James F. Mahoney  
2200 South 75th Avenue  
Phoenix, Arizona 85043

*2:07cv382c-MHT*

2. Article Number

(Transfer from service label)

7006 3450 0000 5887 7574

DS Form 3811, February 2004

A. Signature <i>X Linda Aranda</i>	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
B. Received by (Printed Name) Linda Aranda	C. Date of Delivery <i>5/9/07</i>
D. Is delivery address different from item 1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:	

*SNS&Cnp.*

3. Service Type
<input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail
<input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.
4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes

Domestic Return Receipt

102595-02-M-1540